## **Criminal Offender Record Information ("CORI")**

## **Vendor Agreement of Non-Disclosure**

This agreement is entered into on (date)	by and between
(herein	after "CRIMINAL JUSTICE AGENCY") and
(hereinafter "VEN	DOR").
WHEREAS, VENDOR is a consultant/contr	ractor to the CRIMINAL JUSTICE AGENCY
to provide (describe the project)	
	, and
WHEREAS, certain employees of VENDO	OR must have access to Criminal Offender
Record Information ("CORI") in order to	
	, and
WHEREAS, employees of VENDOR cannot	at legally be permitted access to CORI unless
they are employed as consultants to a criminal justice age	ency;
NOW THEREFORE, VENDOR and the CR	IMINAL JUSTICE AGENCY hereby agree as
follows:	

- 1. Certain employees of VENDOR shall be designated as CONSULTANTS to the CRIMINAL JUSTICE AGENCY.
- 2. The CONSULTANT(S) shall be notified by the CRIMINAL JUSTICE AGENCY that the dissemination of CORI is subject to the provisions of M.G.L. c. 6, §§ 167-178B and to the rules and regulations approved by the Criminal History Systems Board ("CHSB"), stating that s/he has been advised that any disclosure of CORI except as permitted under the sections of law and regulations cited above can result in a fine of up to five thousand dollars (\$5,000.00) and/or one year imprisonment in jail or house of correction, in addition to civil liability for damages pursuant to § 177 including exemplary damages, and a civil fine of up to five hundred dollars (\$500.00) per violation if the CHSB finds such a willful violation.
- 3. The CONSULTANT(S) will agree by separate agreements that CORI shall be reviewed only for purposes of the services listed in this agreement and will use such CORI as may be made

available to him/her under the provisions of this Agreement only under the direct supervision and control of the CRIMINAL JUSTICE AGENCY.

- 4. The CONSULTANT(S) will further agree, in said separate agreements, not to disclose CORI to any unauthorized person and to use CORI only as permitted by the regulations approved by the CHSB.
- 5. The CRIMINAL JUSTICE AGENCY agrees that the CONSULTANT(S) will have the status of CONSULTANT(S) to the CRIMINAL JUSTICE AGENCY for the purpose of such regulations and shall permit the CONSULTANT(S) to utilize, but not disseminate, CORI. Such access shall be permitted only in a manner consistent with the sections of law cited above and the regulations approved by the CHSB cited above. No CONSULTANT(S) shall be permitted access to CORI until the CRIMINAL JUSTICE AGENCY has submitted a copy of this document to the CHSB as well as separate agreements signed by the individual CONSULTANT(S) to be bound by the provisions of this Agreement.

IN WITNESS WHEREOF, VENDOR and the CRIMINAL JUSTICE AGENCY have caused this Agreement to be executed as of the day and year first written above.

	Criminal Justice Agend	cy
Name & Title Printed		Signature
	Vendor	
Name & Title Printed		Signature

The Criminal Justice Agency and the Vendor must forward a copy of all pages of this signed agreement to the Criminal History Systems Board,

Field Services Unit, at 200 Arlington St., Suite 2200, Chelsea, MA 02150; FAX: 617.884.4601

## Criminal Offender Record Information ("CORI") Individual Agreement of Non-Disclosure

I,	, acknowledge that	I have read and understand the provisions	s of
Massachusetts General Laws, c.	6, §§ 167-178B, of which sec	tions 177-178 provide that it is a crimin	nal
offense to willfully disclose to any	unauthorized person or agency	y any criminal offender record informati	on
concerning an individual or to w	villfully falsify any criminal of	fender record information. Unauthorize	zed
access to or dissemination of crim	ninal offender record information	n is punishable by a fine of not more the	hat
five thousand dollars (\$5,000.00), of	or imprisonment in jail or house	of correction for not more than one ye	ar,
or both. Any such dissemination a	also subjects me to a suit for civ	vil damages and/or a civil fine of up to f	ive
hundred dollars (\$500.00) for each	such willful violation.		
I also understand that a criminal	record check will be conducted	ed on me by the Criminal Justice Agen	ю
and/or the Criminal History System	ns Board as a prerequisite to my	having authorization for access to COR	I.
Signed this day of	, 200		
Signature			
Last name	First name	 Middle initial	
	1 1100 1101110	1/11/11/11	
Maiden name	Alias	<del></del>	
Date of Birth (MM/DD/YY)	Social Security Number (	requested but not required)	
Job title			
Job due			
Agency/ Business			
Address			

This document is to be completed by ALL persons employed by, contracted with, or otherwise operating in association with the herein named agency, and who may have access to CORI.